

ISSUE SLIP STAPLE AREA (for additional)

**BEST AVAILABLE COPY**

ID NO.

BEST AVAILABLE COPY			
POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>8/9/99</i>
O.I.P.E. CLASSIFIER	<i>LSW</i>	<i>32</i>	<i>3/11/99</i>
FORMALITY REVIEW		<i>70619</i>	<i>3/15/99</i>

		<b>INDEX OF CLAIMS</b>		
.....	Rejected	N .....	Non-elected	
.....	Allowed	I .....	Interference	
.....	Canceled	A .....	Appeal	
(Through numeral).....	Restricted	O .....	Objected	

[illegible]

Claim		Date	
Final	Original		
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Claim		Date	
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**If more than 150 claims or 10 actions  
staple additional sheet here**

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